

## Agenda – DAY 1

### **Overview and Introduction into Pre-filled Syringe Market**

*Overview & Trends • Stakeholders • User's perspective*

### **Technical Aspects**

*Syringe • Plunger • Needle • Needle shield or Tip cap • Autoinjector •  
Regulatory guidelines and technical standards*

### **Overview & Introduction into Drug-Syringe Interactions**

*Aggregation • Degeneration • Oxidation • Viscosity • Bubbles*

### **Overview & Introduction to manufacturing Process of PFS**

*Syringes Barrel Forming • Washing • Siliconization • Sterilization • Regulatory  
guidelines and technical standards ...*

### **Fill and Finish**

*Filling • Stoppering • Assembly • Technical Standards*

### **Hands-on Session 1**

# Drug features

- Viscosity, pH, concentration
- Volume
- Sensitivity
  - Light
  - Oxygen
  - Temperature
  - Particles
  - Silicone oil
  - Storage
  - Vibration
  - Shear forces
  - Rubber components
  - Tungsten, glue, steel

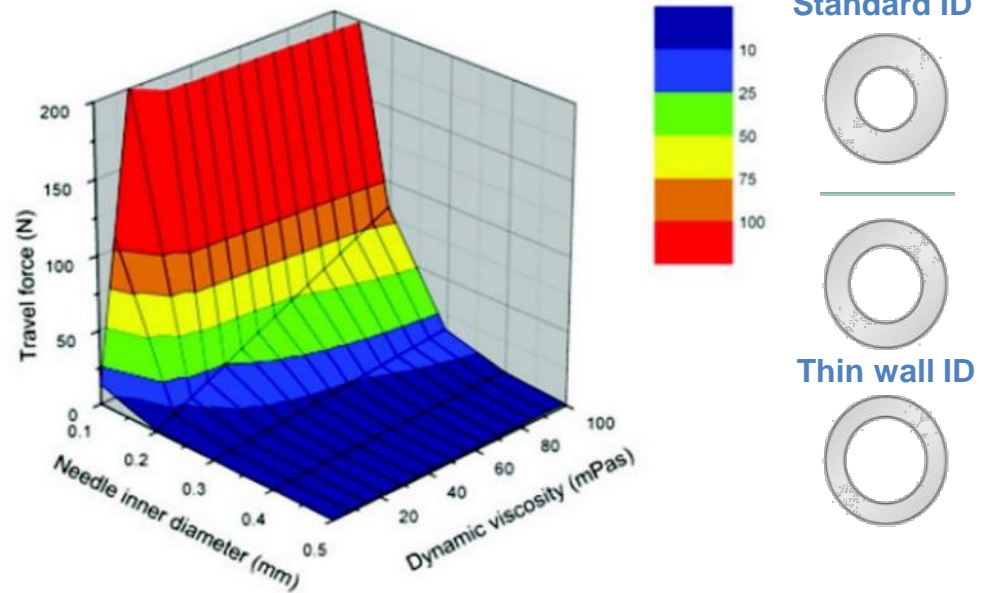


# Drug-syringe Interactions

## Viscosity

- Viscosity defines syringe expression force
- Needle inner diameter and length determine force

*Calculated travel force as a function of needle inner diameter and dynamic viscosity for an injection rate of 0.1 mL/s using a syringe with an inner diameter of 4.6 mm and a needle of 20 mm length applying the Hagen-Poiseuille equation*

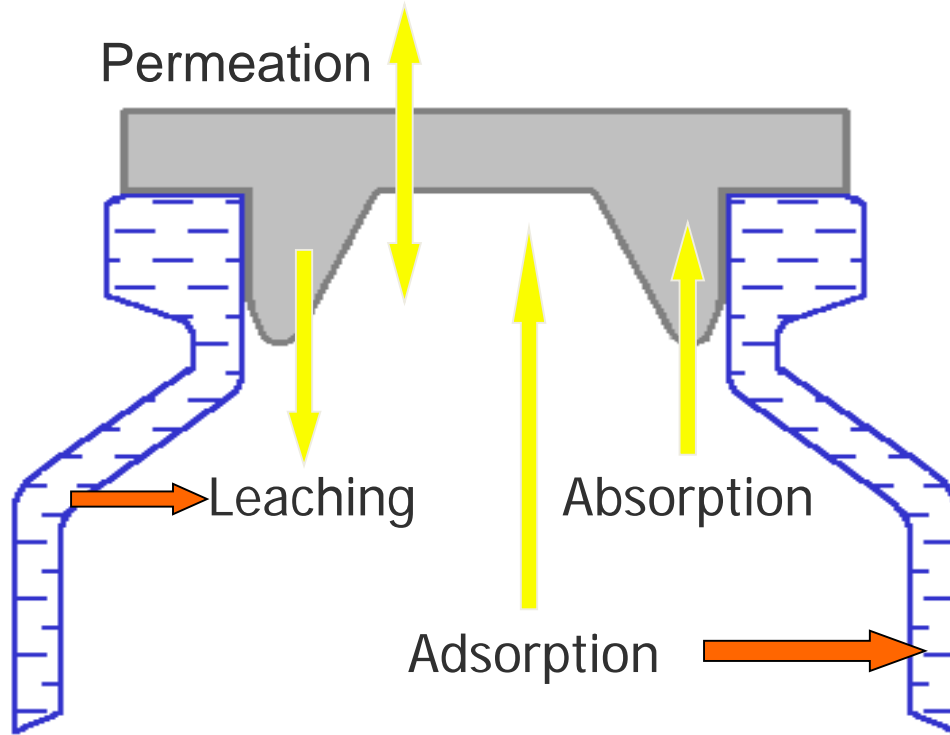


$$F = 8 Q \mu L / \pi R^4 * A$$

Hagen-Poiseuille equation

- F= Frictionless travel force
- L = Needle length
- Q = Volumetric flow rate
- R = Needle inner diameter
- μ = Fluid viscosity
- A = Cross sectional area of syringe plunger

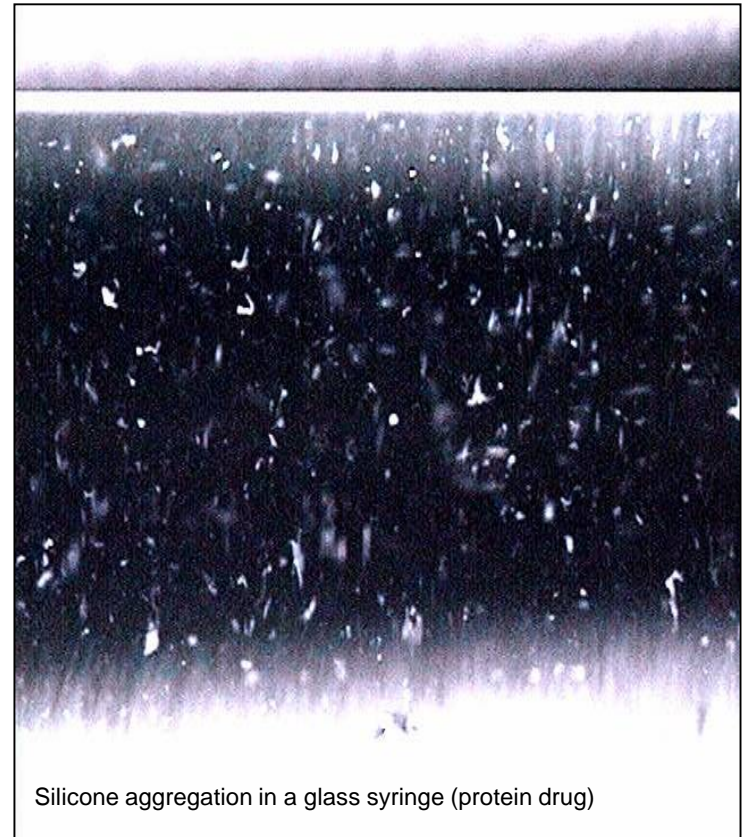
# Possible Interaction of Drug Product and Elastomeric Closures



These four interactions generally occur at a low rate

# Observed Interactions of Proteins with Pharmaceutical Elastomers

- Dimerization
- Aggregation (e.g. due to free subvisible silicone oil)
- Adsorption of API (at elastomers and container walls)
- Increased immunogenicity (interactions with leachables)
- OOS results for moisture content (e.g. for lyophilized products)



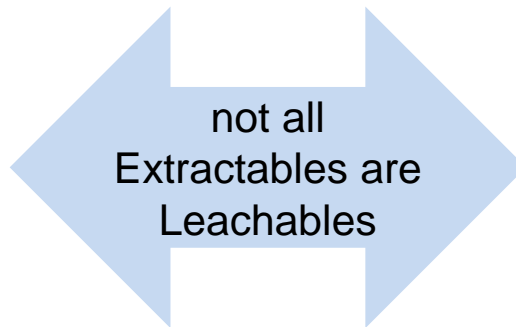
## Definitions

### Extractable

Compounds forced/extracted from a container closure component/system in the presence of an appropriate solvent

### Leachable

Compounds that leach from elastomeric, plastic components or coatings of the container and closure system as a result of direct contact with the drug formulation

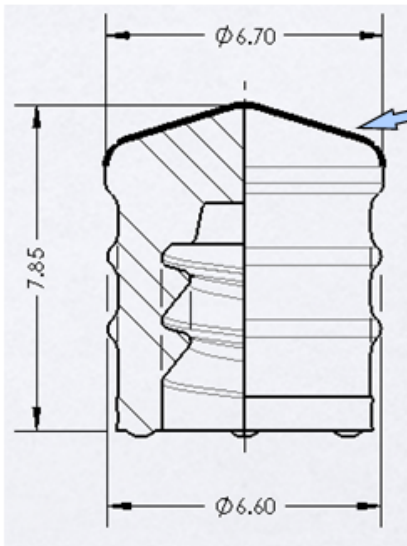




# Minimizing Drug Safety Risk

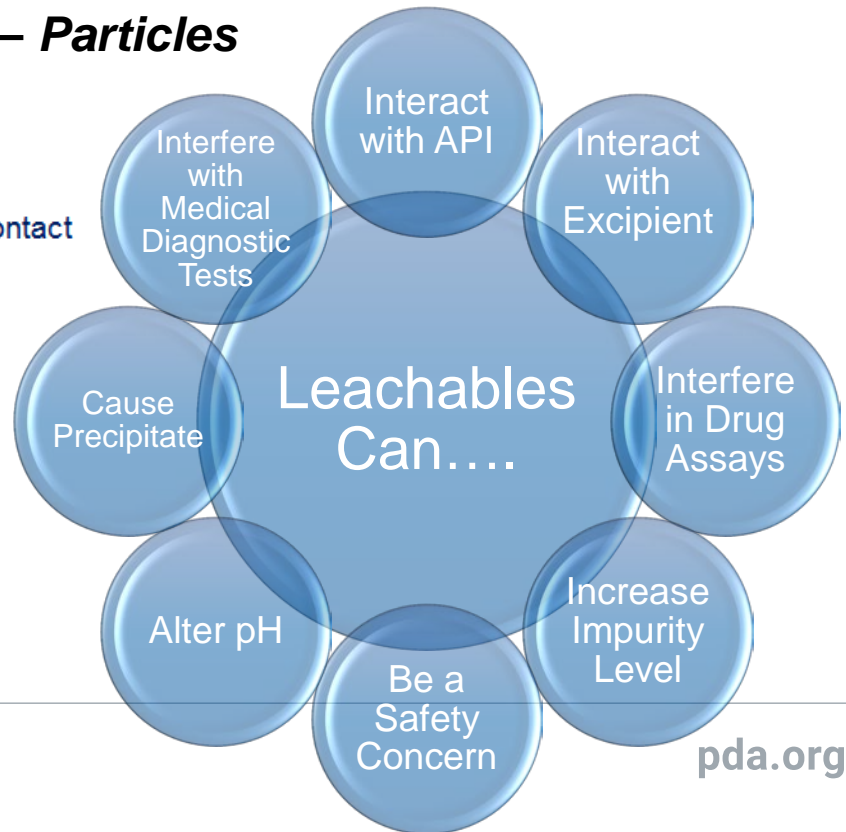
## Lamination fluoropolymer barrier film Advantages

- Barrier against organic and inorganic compounds – **Extractables**
- Minimizes interaction between drug/closure – **Leachables**
- Reduces adsorption and absorption of drug product – **Potency**
- Eliminates need for adding silicone oil – **Particles**



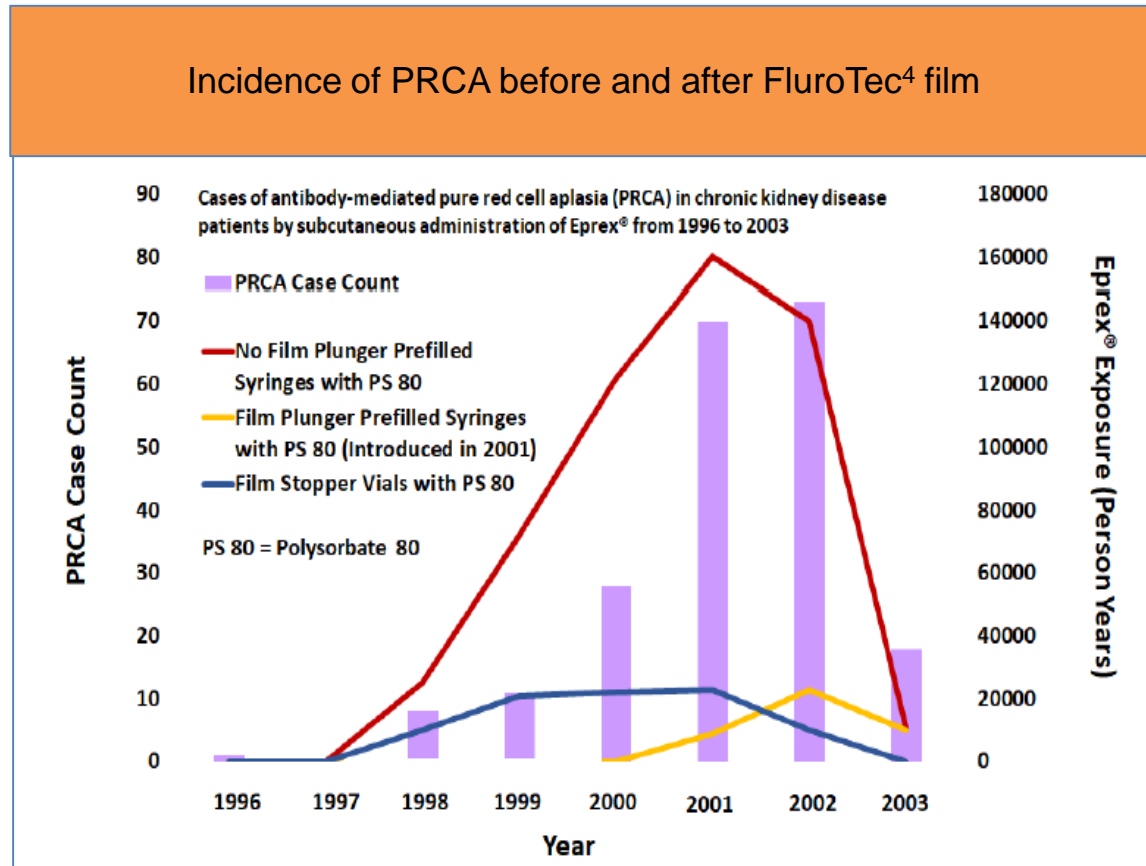
**Laminated area:**  
-Eliminates direct drug contact

**Rib area:**  
- Provides sealing  
- B2 coating



# FluroTec® Products Protecting Drug Product Quality and Safety

- FluroTec film has been shown to reduce leachables based on both clinical use as well as empirical data, demonstrating reduction of gas permeation into vial headspace and minimal to no migration into liquid when challenged with strong solvents and harsh conditions.
- A Clinical example demonstrating protective barrier properties:
  - Eporex® packaged using FluroTec laminated stoppers reduced the incidence of pure red cell aplasia (PRCA) by creating a barrier to a rubber accelerator leaching from the elastomer.



Eporex® is a registered trademark of Johnson & Johnson  
 4 Boven, K, et.al., The increased incidence of pure red cell aplasia with an Eprex formulation in uncoated rubber stopper syringes, *Kidney Int.* 2005 Jun;67(6):2346-53.

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 FluroTec technology is licensed from Daikyo Seiko, Ltd.



# Drug-syringe Interactions I

## Bubbles

- Generated in filling process
- Less bubbles in vacuum stoppering
- Bigger bubble in vent tube stoppering
  
- Transport test recommended
- Moving bubble during transport
- Potential effect on drug formulation
  
- Expansion and plunger movement risk in air transport (CCI harmed)
- Air means oxygen



# Drug-syringe Interactions II

## Various interactions possible

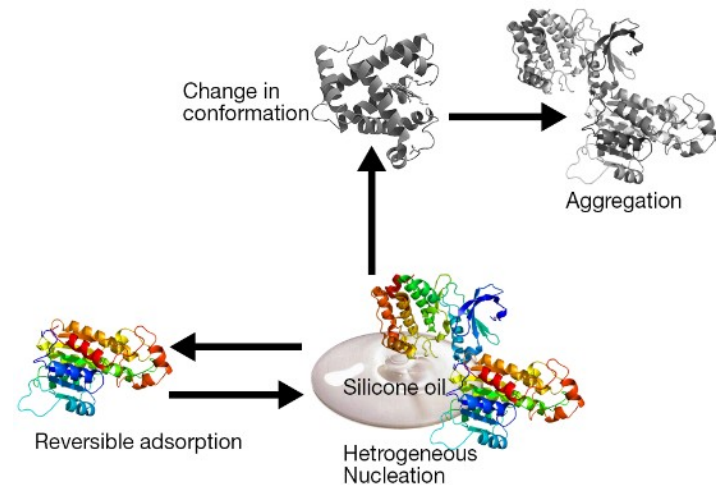
- Aggregation
- Degeneration
- Oxidation
- Adsorption

## You see

- Precipitation
- Blurring
- Nothing

## Triggered by

- Drug formulation itself
- Temperature changes, light, oxygen
- Bubbles and mechanical stress
- Barrel: silicone oil, tungsten, glue, steel
- Elastomer components: cap, stopper



## What can be done?

- Stability testing
- Low tungsten, low silicone oil components
- Extractables profile of rubber components
- Reformulate or stay in vial

# Drug-syringe Interactions III

## Not seen in syringes – yet another benefit over vials

- pH shift
- Delamination

## Why in vials, but not in syringes?

- Vial forming more stressing to glass
- Syringe inside covered by silicone oil
- More aggressive buffers and formulations filled in vials (?)
- Higher pH in vials than in PFS (?)
- PFS normally based on physiologic sodium chloride solution (?)

## Options

- Surface treatment of vials ( $\text{SiO}_2$ , Ammonium sulphate)
- Special high resistance glass vials
- COP vials
- Reformulate

